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CLOSING THE GAPS IN THE
AVAILABILITY AND ACCESSIBILITY
OF HEALTH SERVICES

THE 1965 Health Conference of The New York Academy of Medicine was planned with the idea of providing a national forum for critical and responsible discussion of some basic health-care issues confronting the nation. Our purpose in publishing the papers presented to this conference is to share the stimulating proceedings with physicians and all others working in the health-care field, as well as with the general public. We realize that many physicians engaged in the practice of medicine must depend on publications such as this to keep informed of health-care developments outside their day-to-day work with patients. In a larger sense, we believe that one of our major responsibilities is to help all interested persons gain greater insight into the complex changes being wrought in every aspect of the nation's health care.

Ours is a dynamic society, and it is well that this is so. It is through continuous innovation and the exploration of new ideas and methods that we approach the goals of a democratic society—to enhance individual well-being and make desired social gains for the entire community. In the field of health care, for example, patterns of providing and financing health services constantly are being modified to meet the changing needs of people. Moreover the momentum of the pace of change in health care will be increased considerably by the passage of

federal legislation financing health services for all the aged through the Social Security system. It is vital for all of us working in the field of health care not only to understand these changes, but to understand, too, the reasons behind the changes. As professional people devoting our lives to better health care for our patients, and for all in the community, we have a very particular responsibility to help guide the direction and form of changes that take place.

Amid the pressures and turmoil of emerging health-care events, The New York Academy of Medicine provides an island of dispassionate scholarship for reasoned and thoughtful consideration of the forces and interactions of the times. Thus, since its establishment 118 years ago, the Academy has dedicated itself to exploring new ideas, assessing new developments, and making its observations available to the community at large. It is in keeping with this tradition that the Academy fosters and encourages the exchange of different points of view evaluating the way health care is organized and financed today, and the way it might be more effectively organized and financed tomorrow. We must bear in mind, however, that the mechanics of organization and financing are only tools for reaching our ultimate goal: bringing a higher quality of health care within the reach of all people.

The Academy's fulfillment of its responsibilities to the American people and to those who provide their health care takes many forms. This conference, and the papers here collected, are only one example. Among the many other projects in which we are engaged and which are sponsored by the Committee on Special Studies that I serve as chairman is the Committee on Social Policy for Health Care. This group of 40, representing all the disciplines of the health services, has held a series of seminars to discuss social policy for health care. We invited persons from many fields of interest, each of whom has had a unique contribution to make in preparing a background paper as the basis for one or more of our seminars. The observations of this special committee were the subject of periodic discussions at meetings of the Trustees and Council of the Academy. Early this year, after about two years of careful study by our Committee on Social Policy for Health Care and our regularly constituted Academy Committee on Special Studies, the Academy's Trustees and Council formulated and adopted, on May 26, 1965, the document entitled "A Policy Statement on the Role of Government Tax Funds in Problems of Health Care." This statement

has been widely used throughout the United States in accordance with the Academy's desire to share its thinking with as many people and groups as possible. We have seen much evidence that this single statement has already helped to shape many health-care program decisions.

Because this policy statement is consistent with many of the thoughts expressed at this conference, I believe it appropriate to make it a permanent part of this publication. The statement represents, as does the conference, the spirit of leadership in health affairs that we who are closely associated with the Academy believe to be the special and independent role inherited by us from the great medical scholars before us who made the Academy the institution we know today. For this reason I include in this brief introductory statement the following declaration of Academy policy:

A POLICY STATEMENT ON THE ROLE OF GOVERNMENT TAX FUNDS IN PROBLEMS OF HEALTH CARE*

IN the light of present knowledge and informed opinion the Trustees and Council of The New York Academy of Medicine believe that:

1) In the United States today a serious gap exists between the state of health of significant numbers of people and that state of health which would be attainable if the best of present-day medical knowledge were more universally available and more fully utilized by the people of this country.

2) A major goal of our democratic society must be that all people have the assurance of an equal opportunity to obtain a high quality of comprehensive health care.

3) The attainment of the goal of equal access to a high quality of comprehensive health care requires that governmental and voluntary agencies must work together: first, to identify the reasons such services are not more universally available to people; and then, second, to take whatever actions are necessary to make them more widely available.

4) The steps taken to improve the accessibility of health care must always take into account the importance of using the nation's resources in the most effective and economical manner consistent with the enhancement of individual dignity and high standards of care.

5) It is both legitimate and essential that federal, state, and local legislative and executive agencies be concerned that the goal of high-quality comprehensive health care for all our people is reached to the fullest extent possible, and that this concern requires, at appropriate levels of government, such functions as the following:

*In 1963 The New York Academy of Medicine established a Committee on Social Policy for Health Care. After reviewing the conclusions of that Committee, the Trustees and Council of the Academy formulated the above statement and approved it on May 26, 1965. The Statement originally appeared in the *Bulletin of The New York Academy of Medicine* 41:795-796, 1965.

- a) Establishment of priorities for new as well as existing governmental health-care programs.
 - b) Allocation of the funds needed to achieve these priorities.
 - c) Implementation of such measures as are required to assure universal access to health care.
 - d) Introduction of such effective controls as may be needed to assure a high quality of care, economically provided.
 - e) Support of demonstration and research efforts to improve the effectiveness and efficiency of health-care programs.
 - f) Consultation with appropriate professional groups and agencies in the exercise of policy-making and administrative functions.
- 6) When federal, state, or local tax funds are allocated for health-care purposes an appropriate governmental agency must be fully accountable for achievement of the purposes for which the funds were made available—including the establishment and maintenance of standards of performance and the administrative procedures required for economical use of funds.
- 7) The varying fiscal capacities and efforts of the several states have resulted in an uneven and inadequate level of many of those health services that are required in the national interest. When the nation as a whole suffers from such varying levels of essential health services, the resources of the federal government must be utilized for establishing and maintaining standards of service, as well as for an equitable basis of financing throughout the nation.
- 8) The availability of health services, as a matter of human right, should be based on health need alone, not on a test of ability to pay. The full attainment of this goal requires the broadest possible participation in the systems of financing health services, if individual dignity and self-dependency are to be enhanced.
- 9) When federal and/or state and local tax funds are available for purchase of health care, whether for public assistance, social security, or other categories of public program beneficiaries, it is the official health agencies, and the official health agencies alone, to which should be delegated responsibility for the administration of such funds. The official health agency is the only unit of government that can coordinate all governmental health programs and combine public responsibility and accountability and the other functions of public administration with the professional skills, concern, and consultation required for setting standards and for continuous evaluation of program quality and over-all effectiveness.

The contributions to health-care planning being made by the Committee on Special Studies would not be possible without the untiring participation of every Committee member. During this past year more than ever before, the entire Committee worked with extraordinary zeal and enthusiasm. The challenges that lie immediately ahead, facing medicine, the whole of the health community and, in particular, the urban areas throughout the United States, require the kind of pooling of experiences and ideas that this Committee has engaged in wholeheartedly these past years.

A large measure of credit for the work of the Academy must go to Dr. Howard Reid Craig, Director of The New York Academy of Medicine. His concern for patients and deep feeling of fellowship with physicians have inspired his tireless efforts over many years to help bring more understanding to those of us who work with him and those who look to the Academy for guidance. It is his leadership that helps us to explore the frontiers in community health affairs.

Recognition must be given to Dr. Harold Jacobziner, chairman of the subcommittee charged with the responsibility of planning and conducting this conference. As Assistant Commissioner of the New York City Department of Health and as a member of the Committee on Special Studies, Dr. Jacobziner has acted long and faithfully in accordance with the highest principles of his profession. Few people in our generation devote more hours and energy each day to further the cause that the best in health care shall be available to all people.

NORTON S. BROWN

Chairman, Committee on Special Studies

INTRODUCTION

Those of us who are dedicated to the cause of public health are today faced with a cruel paradox. On the one hand, our colleagues in health-care research have fashioned for us new tools for combatting disease and premature death; they have made enormous progress in devising new techniques, inventing new lifesaving procedures, discovering new drugs to aid in the prevention, diagnosis, and treatment of disease, and in giving us an opportunity for a meaningful, positive health experience even in chronic illness. On the other hand, we are often frustrated by our inability to make available and accessible to all our people the full measure of comprehensive health-care services that scientific medicine has made possible.

This paradox represents today's greatest challenge for all who work in the field of health care. It is a challenge to our ingenuity and resourcefulness to organize and administer new patterns for providing the total complex of high-quality health care and to find the financing needed to make these services available to all our people. It was in